

Appln. No. : 09/749,480
 Applicant : Kennedy, et al.
 Filed : December 26, 2000
 TC/A.U. : 2674
 Examiner : Laneau, Ronald

Confirmation No. 4365

Docket No. : 6169-141
 IBM Docket No. : BOC9-1999-0084

TRANSMITTAL LETTER

Via Facsimile Transmission
 Fax No. 703-872-9306 (14 Pages)

MAIL STOP AMENDMENT
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:


Please find enclosed for filing:

1. Response under 37 C.F.R. § 1.111;
2. Please charge any deficiencies or credit any overpayment to Deposit Account No. 50-0951

This Transmittal Letter is submitted in duplicate.

Respectfully submitted,

Date: 24 June 2004


 Gregory A. Nelson, Registration No. 30,577
 Kevin T. Cuenot, Registration No. 46,283
 Brian K. Buchheit, Registration No. 52,667
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08/06/2004 LDIGGS 00000001 500951 09749480
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{WF185775;1}

Certificate Under 37 CFR 1.8(a)

I hereby certify that this correspondence is being transmitted via facsimile transmission to Commissioner for Patents at 703-872-9314 on

24 June 2004
 Date


 Brian K. Buchheit, Esquire, Reg. No. 52,667

Best Available Copy

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

09749480

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	21 minus 20 =	1
INDEPENDENT CLAIMS	3 minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	21	Minus	21	1
Independent	3	Minus	3	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	355.00	OR	BASIC FEE	710.00
X\$ 9=		OR	X\$18=	18.1-
X40=		OR	X80=	/
+135=		OR	+270=	
TOTAL		OR	TOTAL	728.1-

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	21	Minus	21	X
Independent	3	Minus	3	X
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	23	Minus	21	2
Independent	3	Minus	3	X
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X\$ 9=		OR	X\$18=	36.80
X40=		OR	X80=	0
+135=		OR	+270=	0
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	36.80

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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